## A工キ17172

## FOR MINING GENERAL PERMIT Coverage No. MSR32 1 1 0 3 County Holmes

## INSTRUCTIONS

HISTREE.	2010
Coverage recipients shall notify the Mississippi Department of "footprint" of an existing mining activity or modify the existing mall that apply):	Environmental Quality of plans to expand the acreage or nining operation. This form must be submitted when (check
SWPPP details have been developed and are ready for Mi mining activity	DEQ review for subsequent phases of an existing, covered
"Footprint" identified in the original MNOI is proposed to topographic map must be submitted)	o be <del>enlarged</del> (a modified SWPPP and an updated USGS
Mine dewatering is proposed	Mine dewatering has been discontinued
Closed loop wash operations are proposed	Closed loop wash operations have been discontinued
This form must be signed by the original coverage recipient under must have general permit coverage transferred prior to covera discharge storm water associated with proposed expansions of discharge, under the conditions of the General Permit, <u>only upor MDEQ</u> . If mining activities change which will incorporate a wastewaters to State waters additional permitting actions shall be	ge being modified. Coverage recipients are authorized to f dewater pits or operate a recirculation system with no n receipt of written notification of approval by the hydraulic dredging operation or a discharge of process
COVERAGE RECIPIEN	T INFORMATION
COVERAGE RECIPIENT CONTACT PERSON: Hamp Sterling, P.E.	3.
COMPANY NAME: Baldwin Sand and Gravel	
STREET OR P.O. BOX: P.O. Box 456	
CITY: Philadelphia	STATE: MS ZIP: 39350
PHONE NUMBER : (601_ 260-2425	DDRESS: hsterling@wgyates.com
PROJECT INFO	RMATION
ADDITIONAL ACREAGE TO BE DISTURBED: reduce by 120 A	TOTAL ACREAGE: 170
MINE NAME: Coxburg	GEOLOGY APPLICATION/PERMIT NO. P02-046ATA
CITY: Coxburg	COUNTY: Holmes
I certify under penalty of law that this document and all attachments with a system designed to assure that qualified personnel properly gainquiry of the person or persons who manage the system, or those pinformation submitted is, to the best of my knowledge and belief, true penalties for submitting false information, including the possibility of false information, including the possibility of false information.  Signature (must be signed by coverage recipient)  Printed Name  Chief, Environmental Permits Division	thered and evaluated the information submitted. Based on my persons directly responsible for gathering the information, the accurate and complete. I am aware that there are significant

Jackson, Mississippi 39225